PTO/SB/21 (10-07)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/668,964-Conf. #1481
Filing Date	September 24, 2003
First Named Inventor	Yukihiko Minamida
Art Unit	1796
Examiner Name	R. A. Sergent
Attorney Docket Number	80383(47762)

Total Number of Pages in This Submiss	sion	Attorney Docke	t Number	80383(47762)					
ENCLOSURES (Check all that apply)									
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s)	Drawing(s) Licensing-rel Petition Petition to Co Provisional A Power of Attol Change of Co Terminal Disc Request for CD, Number	ated Papers onvert to a pplication rney, Revocation rrespondence Ado claimer Refund	iress	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences X Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter X Other Enclosure(s) (please Identify below): Request for Oral Hearing Fee Transmittal					
	Remarks URE OF APPLICA	ANT, ATTORNI	EY, OR A	AGENT .					
Firm Name EDWARDS ANGELL PALMER & DODGE LLP									
Signature James Juntory									
Printed name ames E. Armstrong	ı, IV	•							
Date February 7, 2008	U	Re	g. No.	42,266					

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<u> </u>	Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Application Number 10/668,964-Conf. #1481					
	1								September 24, 2003		
	FEE TRANSMITTAL								Yukihiko Minamida		
		For FY 20	08					R. A. Sergent			
-	Applicant clai	ms small entity statu	s. See 37 CFR 1.27					1796			
	TOTAL AMOUNT OF	PAYMENT	(\$) 1,030.0	0	Attomey	Docket I	No.	80383(47762)			
	METHOD OF PA	YMENT (check a	Il that apply)								
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	FEE CALCULAT		,,			•					
	1. BASIC FILING, S	EARCH, AND EX	AMINATION FEE	S				····			
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	Application Type	Γ (¢)	Small Entity	F (A)		Entity	5 - (A)	Small Entity			
	Application Type Utility	<u>Fee (\$)</u> 310	Fee (\$) 155	Fee (\$) 510		<u>∍ (\$)</u> 55	Fee (\$) 210	Fee (\$)	Fees Pa	nd (\$)	
f	Design	210	105		,	50	130	105			
	Plant	210	105	100 310				65			
	Reissue	310				55 55	160	80			
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	2. EXCESS CLAIM	FEES							<u>S</u> Fee (\$)	mall Entity Fee (\$)	
	Fee Description Each claim over 20	(including Reissu	ec)						50	-	
•	Each independent cl	_							210	25 105	
	Multiple dependent	•	amg reissues)						370	185	
	Total Claims		Fee (\$)	Fee Pa	id (\$)		м	ultiple Depende		103	
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	4. OTHER FEE(S) Non-English Spe	ecification, \$130	fee (no small ent	ity discou	ınt)			_	Fees P	aid (\$)	
]	Other (e.g., late filing surcharge): 1403 Request for oral hearing 1,030.00								0.00		

SUBMITTED BY	Λ				đΖ				
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Name (Print/Type)	ames E.	Armst	rong, IV		\Box			Date	February 7, 2008
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